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CONFIRMATION NO. 9381

| SERIAL NUMBER | FILING or 371(c) DATE RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | |
|---|---|-------------------------------|---|---------------------------|--------------------------------|
| 10/535,504 | 05/18/2005 | 356 | 1645 | SAND3.0-003PCT/US | |
| APPLICANTS Ira Sanders, North Bergen, NJ; | | | | | |
| ** CONTINUING DATA ***** This application is a 371 of PCT/US03/37286 11/20/2003 which claims benefit of 60/427,749 11/21/2002 | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** | | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/ROD P SWARTZ/</u> Examiner's Signature | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY NJ | SHEETS DRAWINGS 0 | TOTAL CLAIMS 24 | INDEPENDENT CLAIMS 3 |
| ADDRESS OMRI M. BEHR 325 PIERSON AVENUE EDISON, NJ 08837-3123 UNITED STATES | | | | | |
| TITLE Treatment of mammalian reaction of ige interactions | | | | | |
| FILING FEE RECEIVED 350 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |